

EMPLOYEE SEPERATION CHECKLIST

EMPLOYEE NAME: _____

EMPLOYEE TITLE: _____

Check and complete one of the columns below as appropriate:

I. EMPLOYMENT TERMINATED		II. EMPLOYEE REMOVED FOR CAUSE	
Date (Mandatory)	Action	Date (Mandatory)	Action
	Last Day of Employment		Date of Removal
	Revoked the employee's access to all Government systems and data and notified the Project Officer in writing upon completion of these actions. This should be done immediately upon termination.		Physically removed the employee from working under this contract.
	Confirmed that employee either completed all assigned tasks or briefed the replacement employee on the requirements and status of ongoing tasks.		Notified the Project Officer, appropriate NIH security officials, and the assigned IT Systems Manager of the time of removal. This should be done immediately upon removal.
	Determined the employee's access termination date, and notified the Project Officer, appropriate NIH security officials, and the assigned IT Systems Manager within 24 hours of the time of termination.		Revoked the employee's access to all Government systems and data and notified the Project Officer in writing upon completion of these actions. This should be done immediately upon removal.
	Requested the assigned IT Systems Manager to terminate the contractor employee's access authorizations.		Requested an immediate revocation of the contractor employee's access authorizations.
	Reviewed with the employee his/her obligations to protect agency information accessed while working under this contract.		Retrieved all keys and badges.
			Requested the Project Officer to have the combinations changed on all locks to which the contractor employee had access.
			Reviewed the employee's duties and responsibilities under this contract with the Project Officer and assessed the level of risk to the Government.

CERTIFICATION: By signing below, I certify that the above actions were taken on the dates indicated.

Signature and Date

Typed Name and Title of Individual Authorized to Certify for Contractor